FOR OFFICE USE ONLY

Date Received: 1-27-09

Application No.: 71-576699.0005

## ARIZONA DEPARTMENT OF WATER RESOURCE

NA DELAKTMENT OF WATER RESOUR
Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105
Phone (602) 771-8585 Fax (602) 771-8689
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APPLICATION FOR UNDERGROUND STORAGE FACILITY PERMIT (A.R.S. § 45-811.01)

**APPLICATION FEE \$ 750.00 DUE UPON FILING** 

PERMIT FEE OF \$ 500.00, PLUS NOTICE AND PUBLICATION FEES TO BE DETERMINED, WILL BE DUE PRIOR TO ISSUANCE OF

FACILITY DESIGN: (check one) APPLICATION FOR: (check one				
X Constructed	☐ Underground Storage Facility (USF)			
Managed	X Modification of USF permit no.:			
	71- <u>576699</u>			
	Renewal of USF permit no.:			
	71			
Gl	ENERAL INFORMATION			
. Name of Applicant: Vidler Water Co	ompany, Inc.			
3480 GS Richards Blvd., Suite 10	1 Carson City Nevada 8970			
Mailing Address	City State Zip			
Contact Person: Greg Bushner	Telephone:			
. Is this a State Demonstration Project?	Yes X No			
	y Conservation Districts qualify to participate in State Demonstration			
Project program.)	, , , , , , , , , , , , , , , , , , ,			
Name of Active Management Area or Irrigation	n Non-Expansion Area where the facility will be located:			
Harquahala Valley Irrigation Non-				
(If the facility is NOT least	ed within an AMA or INA, please indicate "NONE.")			
(if the facility is NOT tocate				

5. and SE 1/4 of Section 34, SW 1/4 and S 1/2 of the SE 1/4 of Section 35, T3N and R11W (quarter/quarter/quarter/section, township and range - see Appendix C of USF Application Guide)

6. Does the applicant own the land wl	here the facility is to be lo	located? X Yes No	
7. The total design capacity of the fac	ility: 2 000 000 aa	omo foot	
7. The total design capacity of the fac		e-feet to be stored over the duration of the USF	permit)
8. The maximum annual amount of w		e at this facility: 100,000 acre-feet per year	
		(acre-feet per yea	ır)
9. Proposed duration of permit: 20	) years	(years)	
10. Type of source water to be stored:		(yeurs)	
	] Effluent	☐ Decreed and Appropriative Surface Water	
If Decreed and Appropriative S	Surface Water, list river(s	s):	
		n use permit from the county flood control distric	ct before
beginning any construction activities			
12. For managed USFs where effluen	t will be stored only: A	are you requesting that this facility be designated	as a
		ument or state park, as described in A.R.S. § 45-	
811.01(D)?		·	
☐ Yes 🏿 No			
If yes, please submit a completed U	SF Permit Application Su	upplement to designate a Managed Underground	l Storage
		nal monument, or state park and all additional inf	-
as described on the USF Permit App		·	
13. For permit modifications only, give	e a brief description of the	ne modification(s) requested by this application:	
This permit modification re	quest is to incorpor	orate an additional 797-acres incorporused to recharge additional CAP water	orating
	SUPPORTING E	EVIDENCE	
submitted prior to receiving a complete ar	nd correct determination be apply to the modification	<b>Ibmittal.</b> For a new USF application, all items reby the Department. For a modification to an exin. For a full description of these requirements re	sting
14. USF Site and Facility Characteristics:	:		
∑ Site Characteristics			
▼ Facility Characteristics	[X] Hydrogeology		
15. Unreasonable Harm and Hydrologic I	Feasibility Analysis:		
X Procedures and Results for Calcula	ting Maximum Area of In	mpact and Mounding Analysis	
∑ Land and Water Use Inventory	\[ \begin{align*} \text{Unreasonable } \\ \end{align*} \]		
Water Quality     ■ Mater Quality	X Hydrologic Fea	asibility Conclusions [X] Operation and Maintena	ance

16. Legal Requirements:  ☐ Technical Capability	☑ Financial Capability		
	NOTARIZED SIGNATURE		
I (We), <u>Vider Water Co</u> certify under the penalty of perjury, that the knowledge and belief true, correct and comp		nt(s) named in this applicatio	on, do hereby of my (our)
775 885 - 5000 Telephone	Signature of owner or	authorized agent	
	DRESIN	icut	
3480 GS RICHAR AS A	Blub, Stelol Canso City	State	8970 <u>-</u> Zip
STATE OF ARIZONA NEUADA County of CTREON CITY	) ) ss. )		
Subscribed and sworn to before me this	<del>Joth</del> day of <u>JAnu</u>	ARY , 20_	09_

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My commission expires